FORM D .



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

Expires: November 30, 2001
Estimated average burden
hours per response . . . 16.00

OMB Approval

OMB Number 3235-0076

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTIO

Prefix Serial

DATE RECEIVED

	if this is an amendment and name has changed, and indicate ded Partnership Units in Conestoga BD Partners, L.P.	(change.) 120980
Filing Under (Check box(es) th	at apply:) 🗖 Rule 504 🔲 Rule 505 🖾 Rule 506 🛭	☐ Section 4(6) ☐ ULOE
Type of Filing:	ing   Amendment	
	A. BASIC IDENTIFICATION D	DATA
1. Enter the information reque	sted about the issuer	
,	ck if this is an amendment and name has changed, and indicat BD Partners, L.P.	te change.)
•	(Number and Street, City, State, Zip Code) way, #200, Dallas, Texas 75231	Telephone Number (Including Area Code) (214) 932-3100
Address of Principal Busines (if different from Executive C	s Operations (Number and Street, City, State, Zip Code) Offices)	Telephone Number (Including Approx ESSE
Brief Description of Business limited partnership formed to p	ourchase securities in a limited partnership that owns and ope	rates a single-tenant industrial building   APR 11 2003
Type of Business Organization  □ corporation  □ business trust	<ul><li>☑ limited partnership, already formed</li><li>☐ limited partnership, to be formed</li></ul>	other (please specify): general partnership
Actual or Estimated Date of In Jurisdiction of Incorporation	,	Year 2002 ⊠ Actual □ Estimated breviation for State; CN for Canada; FN for other foreign

### **GENERAL INSTRUCTIONS**

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77(d)(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

:					A. BASIC IDEN	<u>TIFICA</u>	TION DATA				
2. Enter the inform	nation rec	queste	d for the follo	owing:							
•	Each pr	omote	er of the issue	r, if the	e issuer has been orga	inized wi	thin the past five year	s;			
•			ial owner hav he issuer;	ving th	e power to vote or d	ispose, o	or direct the vote or o	lispositi	on of, 10% (	or more	e of a class of equity
•	Each ex	ecutiv	ve officer and	direct	or of corporate issuers	s and of c	corporate general and	managi	ng partners o	f partne	ership issuers; and
	Each ge	neral	and managin	g partn	er of partnership issue	ers.					
Check Box(es) that	Apply:		Promoter				Executive Officer		Director	X	General and/or Managing Partner
Full Name (Last na Conestoga BD GP	, L.L.C.										
Business or Reside 10100 North Centr					City, State, Zip Code) as 75231						
Check Box(es) that	Apply:	X	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last na Macfarlan Real Est			,								
Business or Reside 10100 North Centr					City, State, Zip Code) is 75231						
Check Box(es) that	t Apply:	X	Promoter	$\boxtimes$	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last na Macfarlan Holding		if ind	lividual)					_			
Business or Reside					City, State, Zip Code) as 75231	)				•	
Check Box(es) that					Beneficial Owner	×	Executive Officer		Director		General and/or Managing Partner
Full Name (Last na Macfarlan, Dean	ıme first,	ifind	lividual)			_					
Business or Reside					City, State, Zip Code) as 75231	)					
Check Box(es) that					Beneficial Owner	X	Executive Officer		Director		General and/or Managing Partner
Full Name (Last na Jenkins, John L.	me first,	if ind	lividual)								
Business or Reside 10100 North Centr					City, State, Zip Code) as 75231	)					
Check Box(es) that					Beneficial Owner	X	Executive Officer		Director		General and/or Managing Partner
Full Name (Last na Waggoner, Keith A		if ind	lividual)								<u> </u>
Business or Reside	nce Add	ress (1	Number and S	Street,	City, State, Zip Code)	)					

☐ Executive Officer

☐ Director

☐ General and/or Managing Partner

☐ Beneficial Owner

10100 North Central Expressway, #200, Dallas, Texas 75231 Check Box(es) that Apply: Promoter Benefici

Business or Residence Address (Number and Street, City, State, Zip Code)

Full Name (Last name first, if individual)

B. INFORMATION ABOUT OFFERING			
	Yes	No	
1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?	$\boxtimes$		
Answer also in Appendix, Column 2, if filing under ULOE.			
2. What is the minimum investment that will be accepted from any individual	\$ <u>12</u>	.500_	
:	Yes	No	
3. Does the offering permit joint ownership of a single unit?		$\boxtimes$	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.			
Full Name (Last name first, if individual) Empire Financial Group, Inc.			
Business or Residence Address (Number and Street, City, State, Zip Code)			
1385 West State Road 434, Longwood, Florida 32750  Name of Associated Broker or Dealer	·		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			
(Check "All States" or check individual States)			All States
[CA] [FL] [GA] [NY] [OH] [TX] Full Name (Last name first, if individual)		···	
Dunwoody Brokerage Services, Inc.			
Business or Residence Address (Number and Street, City, State, Zip Code) 4243 Dunwoody Club Drive, Suite 200, Atlanta, Georgia 30350			
Name of Associated Broker or Dealer			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			
(Check "All States" or check individual States)			All States
Full Name (Last name first, if individual)			
Capital Growth Resources, Inc.			
Business or Residence Address (Number and Street, City, State, Zip Code)			
405 East Lexington Ave., #201, El Cajon, California 92020  Name of Associated Broker or Dealer			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)			All States
[CA] [FL] [NV] [TX]			
Full Name (Last name first, if individual) Greystone Securities Corporation			
Business or Residence Address (Number and Street, City, State, Zip Code) 3816 S. Greystone Court, Springfield, Missouri 65804	-		****
Name of Associated Broker or Dealer			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			•
(Check "All States" or check individual States)			All States
[IL] [KS] [MO] (OK] Full Name (Last name first, if individual)			<del></del>
Harrison Douglas, Inc.			
Business or Residence Address (Number and Street, City, State, Zip Code) 5303 E. Evans Ave., Suite 201, Denver, Colorado 80222			
Name of Associated Broker or Dealer			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			AU Co
(Check "All States" or check individual States)  [CA] [CO] [FL] [MO] [OH] [TX]		⊔	All States
	·		

B. INFORMATION ABOUT OFFERING			
	Yes	No	
1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?	$\boxtimes$		
Answer also in Appendix, Column 2, if filing under ULOE.			
What is the minimum investment that will be accepted from any individual	\$ <u>12,</u>	500	
	\$_12,500_ Yes No		
3. Does the offering permit joint ownership of a single unit?			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.			
Full Name (Last name first, if individual) Rushmore Securities Corporation			**
Business or Residence Address (Number and Street, City, State, Zip Code)			
13355 Noel Road, Suite 300, Dallas, Texas 75240  Name of Associated Broker or Dealer			
Name of Associated Broker of Dealer			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			
(Check "All States" or check individual States)			All States
[AR] [CA] [CO] [FL] [GA] [TX] Full Name (Last name first, if individual)			
Sterling Enterprises Group			
Business or Residence Address (Number and Street, City, State, Zip Code)	<del></del>		
286 107th Avenue, Treasure Island, Florida 33706			
Name of Associated Broker or Dealer			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			
(Check "All States" or check individual States)			All States
[CA] [FL] [GA] [TX]		<b>_</b>	7tii States
Full Name (Last name first, if individual)			
Gramercy Securities			
Business or Residence Address (Number and Street, City, State, Zip Code)			
3949 Old Post Road, Suite 101, Charlestown Rhode Island 02813			
Name of Associated Broker or Dealer Rod Scribner			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			
(Check "All States" or check individual States)			All States
[CA] [CT] [FL] [NY] [RI] [TX]			
Full Name (Last name first, if individual)			
Gramercy Securities  Business or Residence Address (Number and Street, City, State, Zip Code)			
3949 Old Post Road, Suite 101, Charlestown Rhode Island 02813			
Name of Associated Broker or Dealer			
Mark Van Mourick			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		_	
(Check "All States" or check individual States)		Ц	All States
[CA] Full Name (Last name first, if individual)			
VSR Financial Services, Inc.			
Business or Residence Address (Number and Street, City, State, Zip Code)			
8620 W. 110 <sup>th</sup> Street, Suite 200, Overland Park, Kansas 66210			
Name of Associated Broker or Dealer			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			
(Check "All States" or check individual States)	•••••		All States
[AL] [AZ] [AR] [CA] [CO] [CT] [FL] [GA] [IL] [IN] [IA] [KS] [KY] [LA] [MN] [MS] [MO]			

B. INFORMATION ABOUT OFFERING			
1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?	Yes ⊠	No □	
Answer also in Appendix, Column 2, if filing under ULOE.			
2. What is the minimum investment that will be accepted from any individual	\$ <u>12</u>	,500	
	v	**	
3. Does the offering permit joint ownership of a single unit?	Yes □	No ⊠	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.			
Full Name (Last name first, if individual) GunnAllen Financial, Inc.			
Business or Residence Address (Number and Street, City, State, Zip Code)			
1715 N. Westshore Boulevard, #775, Tampa, Florida 33607 Name of Associated Broker or Dealer			<u></u>
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)			All States
Full Name (Last name first, if individual)			
Crescent Securities Group, Inc.  Business or Residence Address (Number and Street, City, State, Zip Code)			
5580 LBJ Freeway, Suite 560, Dallas, Texas 75240  Name of Associated Broker or Dealer			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)			A11 C4-4
[CA] [OK] [TX] [VA] [WA]	***************************************		All States
Full Name (Last name first, if individual)			
Basic Investors, Inc. Business or Residence Address (Number and Street, City, State, Zip Code)			
510 Broadhollow Road, Suite 306, Melville, New York 11747			
Name of Associated Broker or Dealer			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)			All States
Full Name (Last name first, if individual) Investors Capital Corp.			
Business or Residence Address (Number and Street, City, State, Zip Code) 230 Broadway East 203, Lynnfield, Massachusetts 01940			
Name of Associated Broker or Dealer			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)			All States
[NY] Full Name (Last name first, if individual) Questar Capital Corporation			
Business or Residence Address (Number and Street, City, State, Zip Code) 655 Fairfield Court, Suite 200, Ann Arbor, Michigan 48108			
Name of Associated Broker or Dealer	<del></del>		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers			A11 C+-+-
(Check "All States" or check individual States)		L	An States

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the column below the amounts of the securities offered for exchange and already exchanged.  Type of Security	Aggregate	Amount Already
	Offering Price	Sold
		\$0
	T	\$0
		\$0
	·	\$ <u>0</u> \$ 1,083,874.08
		\$ 1,083,874.08
		\$ 1,083,874.08
Answer also in Appendix, Column 3, if filing under ULOE	31,550,000	Ψ <u>1,003,074.00</u>
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	19	\$ 788,000.00
		\$ 410,874.08
Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE		\$
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.  Type of offering.	Type of Security	Aggregate Dollar Amount of Purchases
		\$
		\$
		\$
Total		\$
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (Specify finder's fees separately) Other Expenses (identify) State filing fees Total		\$ 0 \$ 8,500.00 \$ 39,750.00 \$ 6,000.00 \$ 0 \$ 386,750.00 \$ 3,500.00 \$ 444,500.00
	if answer is "none" or "zero". If the transaction is an exchange offering, check this box and indicate in the column below the amounts of the securities offered for exchange and already exchanged.  Type of Security  Debt	if answer is "none" or "zero". If the transaction is an exchange offering, check this box   and indicate in the column below the amounts of the securities offered for exchange and already exchanged.  Type of Security  Debt

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer"	,			\$ <u>4</u>	105,500.00
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b. above.					
			Payments to Officers, Directors, & Affiliates		1	Payments To Others
	Salaries and fees	\$_	182,000		\$	0
	Purchase of real estate	\$_	0		\$	0
	Purchase, rental or leasing and installation of machinery and equipment	\$_	00		\$	0
	Construction or leasing of plant buildings and facilities	\$_	0		\$	0
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	\$_	0		s	0
	Repayment of indebtedness	\$_	0		\$	0
	Working capital	\$_	0		\$	0
	Other (specify) Purchase of 156.94 units of limited partnership interest in Conestoga Street Partners, L.P 🗵	\$ <u>3</u>	,923,500.00		\$	0
	Column Totals	\$ <u>4</u>	,105,500.00		\$	0
	Total Payments Listed (column totals added)		\$ <u>4,</u>	105,5	00.00	_

# D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Conestoga BD Partners, L.P.	John .	3/31/03
Name of Signer (Print or Type	Title of Signer (Print or Type)	
John L. Jenkins	President, Conestoga BD GP, L.L.C. (General Partner o	f Conestoga BD Partners, L.P.)

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE		
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification p	Yes provisions of such rule?	No ⊠

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date				
Conestoga BD Partners, L.P.	Jehn	3/31/03				
Name of Signer (Print or Type	Title of Signer (Print or Type)	Title of Signer (Print or Type)				
John L. Jenkins	President, Conestoga BD GP, L.L.C. (Genera	President, Conestoga BD GP, L.L.C. (General Partner of Conestoga BD Partners, L.P.)				

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

1.	2	2.	3.		5.				
	Intend to sell non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				ication State if yes, ch ion of ranted) tem 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	-								
AK									
AZ		i							
AR									
CA									
СО	~		\$4,550,000 of Limited Partnership Units in Conestoga BD Partners, L.P.	1	\$30,000	1	\$25,000		<b>✓</b>
СТ	~		\$4,550,000 of Limited Partnership Units in Conestoga BD Partners, L.P.	1	\$100,000	0	\$0		~
DE									
DC									
FL	*		\$4,550,000 of Limited Partnership Units in Conestoga BD Partners, L.P.	2	\$53,000	1	\$25,000		<b>*</b>
GA									
ні	~		\$4,550,000 of Limited Partnership Units in Conestoga BD Partners, L.P.	1	\$30,000	0	\$0		*
ID									
IL									
IN	<b>*</b>		\$4,550,000 of Limited Partnership Units in Conestoga BD Partners, L.P.	1	\$25,000	0	\$0		~
IA									
KS									

•							 
KY							
LA			- 2-1				
ME	~	\$4,550,000 of Limited Partnership Units in Conestoga BD Partners, L.P.	0	\$0	2	\$75,000	*
MD	¥	\$4,550,000 of Limited Partnership Units in Conestoga BD Partners, L.P.	1	\$150,000	0	\$0	~
MA							
MI							
MN							
MS							
МО							
MT							
NE							
NV							
NH							
NJ							
NM							
NY	·	\$4,550,000 of Limited Partnership Units in Conestoga BD Partners, L.P.	1	\$25,000	0	\$0	<b>/</b>
NC							
ND							
ОН	<b>*</b>	\$4,550,000 of Limited Partnership Units in Conestoga BD Partners, L.P.	1	\$25,000	4	\$49,874.08	1
ок							
OR							
PA							
RI							
SC							
SD							
TN							

TX	~	\$4,550,000 of Limited Partnership Units in Conestoga BD Partners, L.P.	7	\$225,000	9	\$236,000	~
UT							
VT							
VA							
WA	1	\$4,550,000 of Limited Partnership Units in Conestoga BD Partners, L.P.	2	\$125,000	0	\$0	<b>~</b>
wv							
WI							
WY							
PR							